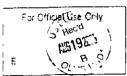
US Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0138 Expires 11-30-2006

This report is mandatory under Pil. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or dividence as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1 File Number U . 13010	2 Fiscal Year Covered From:			
	0[/01/2004 Through 12/31/2004			
3 Name and address of person filing	4. Name, file number, and address of labor organization			
Name PETER E ZARCOTE JR	Name GENERAL Building LABORERS LOCAL LABOR Organization File Number 026-302			
PO Box, Bldg , Room No , if any	P.O. Box, Building and Room Number, if any			
Street 1600 WALT WHITMAN Rd	Street 1600 WAIT Whitman Rd.			
City Melville	city Melville			
State New York ZIP Code + 4 11747	State New York ZIP Code + 4 11747			
5 Position in labor organization. EXECUTIVE Board WEMBER				
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclusion of the except and except an explosion of the except and except and except an except of the except and except and except and except an except of the except and	gerived income or other economic benefit of			
6 Name and address of Employer (including trade name, if any)	7 a. Nature of Interest, Transaction for Income			
Name				
Trade Name, if any				
P O Box, Bidg , Room No , if any	7 b Amount.			
Street				
Cdy				
State ZIP Code + 4				
Sign	ature			
15. Signature and verification. The undersigned declares under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the second	ing documents), has been examinled by the signatory and is, to the best of the			
Signed Y. F. January	On 08/15/2005 631-454-2065 Telephone Number			

Name of Person Filing PETER E. ZARCONE	JR. File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from iselling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8 Name and address of Business (including trade name, if any	9 Business deals with			
Name GENERAL BUILDING LABORES LOCAL GLO WELFARE FUILD Trade Name, If any PO Box. Bldg Room No. If any Street 1600 WALT White Road Cty WELVILLE State Wew York ZIP Code + 4 11747	a Labor Organization b Trust c Employer			
13 If 9 bill or 9 cilis checked give trust or employer's name Name Trade Name, if any	11 a Nature of such dealing			
P.O. Box. Bldg., Room No., if any				
Street	11 b. Approximate dollar value of such dealing			
City Slate ZIP Code + 4	Pro RATA Share of CHRISTMAS PARTY ATTENDED AS Trustee of Local log			
	12 b Amount 4 64.72			
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value			
13 a Name and address of Employer or Labor Relations Consultant (including 'radε name, if any)	14 a Nature of payment.			
Name				
Trade Name, if any				
P O Box, Bldg . Room No , if any				
Streel				
City				
State ZIP Ccce + 4				
13 bills the Business an Employer or Consultant ?	14 b. Amount of payment			

Name of Person Filing PETER E. ZARCONE	JR. Fe Number U-
Billheld an interest in or derived income or economic benefit with monetary values tantial part of which consists of buying from iseting or leasing to lor other of an employer whose employees your labor organization represents or is act [2] any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization or with a trust in which your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent or directly to, or alherwise
Name and address of Business (including trade name of any) Name Greater New York LECET Trade Name If any PO Box Bidg Room No If any Scate 1100 Street 264 WEST 37th Street City New York State New York ZIP Code + 4 10018	9 Business deals with a Labor Orginization b Trust c Employer
Name Trade Name If any P O Box Bldg Room No. If any	11 a Nature of such dealing
Street City Sate ZIP Code + 4	11 b Approximate dolar value 2 such dealing 12 a Nature of interest nets or recome received THE Total of \$85,971.18 is For My wages, conferences and Meeting Due to my Position as Senior Field Representative with Greater New York LECET 12 0 Amount
Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	or parts A and B above
3 a Name and address of Employer or Labor Relations Consultant (Including trade name lift any) Name Fade Name, if any	14 a Nature of payment
P O Box, Bldg Room No , if any Street	
State ZIP Code + 4 13 b Is the Business an Employer or Cons ("ant 2")	14 b Amount of payment

•					
Name of Person Filing Peter E. ZARC	one	JR	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from se'ling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested					
E Name and address of Business (including trade name if any) Name Fox ASSET. WARAGEMENT Trade Name, if any PO Box, Bldg. Room No. if any Street 44 Sycamore Avenue		9 Business deals with a Labor Organization b. Trust c Employer			
Cty Little Silver State New Jersey ZIP Coce + 4 077	39				
Name General Building Labo. Ex Lock PENSION Fond Trade Name, if any PO Box Blog Rcom No. if any Street 1600 WAIT Whitman Rd Cty Melville State New York ZIP Code + 4 117	41 (26)	For Pens 11.b. Approximate dollar value 12.a. Nature of interest h	ent Abvisor ich Fund alue of such dealing. \$89,136.00		
		Trustee	of Rension Fund		
C Received from any emptoyer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value					
13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)		14.a Nature of payment.	-		
Name					
Trade Name, if any					
PO Box, Bldg , Room No , if any	-				
Street					
Cty					

14 b. Amount of payment

13 b Is the Business an Employer

S:ate

ZIP Code + 4

or Consultant

ADDENDA TO THE LM-30 FORM

ADDENDUM A {MEALS/EVENTS WITHOUT SPECIFIC RECORDS OR RECOLLECTION}

It is conceivable that I received the benefit of a meal, ref-eshment or social event from an individual who may be employed by a reportable entity under the Labor-Management reporting and disclosure act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received.

ADDENDUM B {PAC}

I am not reporting any benefits that I may have received from a political action committee (PAC). My understanding is that PACs report all receipts and disbursements under the Federal Election Campaign Act, and I do not need to report under the Labor –Management reporting and Disclosure Act.

ADDENDUM C {UNION TO UNION BENEFITS}

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborers International Union of North America (LIUNA), my employer, or other labor organizations. My understanding of guidance received by the AFL-CIO from the Department of labor is that benefits received from LIUNA – affiliated labor organizations and other labor organizations are not reportable on the LM- 30 report, and I am following that guidance.



August 15, 2005

U.S Department of Labor **Employee Standard Administration** Office of Labor –Management standards 200 Constitution Avenue, NM Room n- 5616 Washington, D.C. 20210

RE: Form LM -30 Filing for Peter E. Zarcone Jr. U - 66 File $\pm 026-302$

Dear Sir or Madam.

Enclosed is my Labor Organization Officer and employer LM-30 for the 2004 reporting period. In Filing the report, I have reviewed all my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the department of labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively tom2004 as a base year in that effort. Further, the department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employee or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record or any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so; I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and a estimate of all lawfully reported benefits that I have received in 2004.

Sincerely, 15 Januare